

Food Distribution National Policy Memorandum

United States Department of Agriculture

SUBJECT:

DATE:

November 9, 2005

POLICY NO:

FD-032: Commodity Supplemental Food Program (CSFP)

(RE-ISSUED)

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Maximum Monthly Distribution Rates for Powdered Infant

Formula

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Food and Nutrition Service

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This memorandum serves to revise the maximum monthly distribution rates for milk-and soy-based powdered infant formula. Infants 0-12 months of age may receive a maximum monthly issuance of ten 12-ounce or nine 14.3-ounce cans of milk-based powdered infant formula; or five 25.7-ounce or nine 14.3-ounce cans of soy-based powdered infant formula. The maximum monthly issuance of the powdered infant formula ranges from 120 to 128.7 ounces, depending upon the type and weight of the powdered infant formula cans distributed. The variance in weight of the powdered formula cans is attributable to differences in current vendor offerings.

FNS Instruction 835-1, Rev. 1 entitled "Authorized Supplemental Foods and Distribution Rates of Foods for the Commodity Supplemental Food Program" provides that, in certain circumstances, children beyond the age of 12 months may qualify to receive infant formula. Such children may not have achieved the developmental level necessary to consume solid foods. Under these circumstances, the CSFP local agency may continue to authorize infant formula, either milk- or soybased, provided that its use is prescribed by a physician and the reason is documented in the child's certification file. Qualified children may receive a maximum monthly issuance of ten 12-ounce or nine 14.3-ounce cans of milk-based powdered infant formula; or five 25.7-ounce or nine 14.3-ounce cans of soy-based powdered infant formula.

An additional can of powdered infant formula (one 12-ounce or one 14.3-ounce can of milk-based powdered infant formula every month; or one 14.3-ounce can of soy-based powdered infant formula every month or one 25.7-ounce can of soy-based powdered infant formula every other month) may be issued to children on an individual basis provided that, per FNS Instruction 835-1, Rev. 1, the need is prescribed by a physician and the reason documented in the child's certification file.

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